

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 9  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00571372       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name of Payee <b>Revolution Agency</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y            12 / 31 / 2015         </div>	
Mailing Address 1020 Princess Street			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           186.75         </div>	
City Alexandria	State VA	Zip Code 22314	<b>Transaction ID : 001</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y            12 / 31 / 2015         </div>	
Purpose of Expenditure Media production		Category/ Type 004	Name of Federal Candidate Jeb Bush	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">         10276344.85       </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Revolution Agency</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y            12 / 31 / 2015         </div>	
Mailing Address 1020 Princess Street			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           186.75         </div>	
City Alexandria	State VA	Zip Code 22314	<b>Transaction ID : 002</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y            12 / 31 / 2015         </div>	
Purpose of Expenditure Media production		Category/ Type 004	Name of Federal Candidate Jeb Bush	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">         20365643.99       </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">         373.50       </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           _____         </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           _____         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 186.75
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/Type 004	Transaction ID : 003 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 7132562.57		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 112.05
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/Type 004	Transaction ID : 004 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 384541.67		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	298.80
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

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Date

MM / DD / YYYY  
12 / 31 / 2015

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 3 OF 9  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00571372       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Revolution Agency</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 1020 Princess Street			Amount 18.68	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 005	
Purpose of Expenditure Media production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		118509.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Revolution Agency</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 1020 Princess Street			Amount 18.68	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 006	
Purpose of Expenditure Media production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AL	
Calendar Year-To-Date Per Election for Office Sought		17919.44	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	37.36
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 9  
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NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.68
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 007 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.68
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 008 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	37.36
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

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12 / 31 / 2015

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.68</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>009</b>
Purpose of Expenditure <b>Media production</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>	
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <b>14419.43</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.68</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>010</b>
Purpose of Expenditure <b>Media production</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>	
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <b>14419.43</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>37.36</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Charles R. Spies

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**12 / 31 / 2015**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 6 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.68</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>011</b>
Purpose of Expenditure Media production		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MA</b>
Calendar Year-To-Date Per Election for Office Sought <b>14419.43</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.67</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>012</b>
Purpose of Expenditure Media production		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>
Calendar Year-To-Date Per Election for Office Sought <b>10244.90</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>37.35</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

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Date

MM / DD / YYYY  
**12 / 31 / 2015**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 7 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.67
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 013 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.67
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 014 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	37.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 8 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.67</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>015</b>
Purpose of Expenditure <b>Media production</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>	
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>TX</b>	
Calendar Year-To-Date Per Election for Office Sought <b>14419.41</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 31 / 2015</b>	
Mailing Address <b>1020 Princess Street</b>		Amount <b>18.67</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>016</b>
Purpose of Expenditure <b>Media production</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 31 / 2015</b>	
Name of Federal Candidate <b>Jeb Bush</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>VT</b>	
Calendar Year-To-Date Per Election for Office Sought <b>14419.41</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>37.34</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Charles R. Spies

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Signature



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 9 OF 9  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.67
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 017 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Revolution Agency</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1020 Princess Street		Amount 18.67
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media production	Category/ Type 004	Transaction ID : 018 Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015
Name of Federal Candidate Jeb Bush		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	37.34
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	933.75

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Charles R. Spies

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